# UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

	ens, Nick Lee and Kimberly raine	) )	Notice of	17-32181-tmb13 Postconfirmation	
Deb	tor(s)	)	Amendme	ent of Plan	
trus <u>Nic</u>	proponent, who is <u>debtor</u> tee; or creditor (also state type k L. & Kimberly L. Evans, 49	00 SE	Wildcat Mo	-	
bya	nd through the undersigned cert	fies tha	t:		
1.	An amended plan dated <u>09/</u>	0/2019	was atta	ched to this notice and filed	with the clerk.
2.	The confirmed plan (docket # becomes the plan.	2	) rema	ins in full force and effect ur	nless the amended plan
3.	The trustee's name and address	are: Wa	yne Goda	re, 222 SW Columbia Stree	et, Suite 1700
	Portland, OR 97201			,	
4.	If proponent is the debtor, che	ck one (	of the follo	wing two options:	
	-	red dek	ot on prope	are updated versions of Scrty), Schedules I and J, and a	. ,
		ssessm	ent. Debto	updated Schedules A/B, I ar r will provide those docu	
5.	Prior to filing this plan with schedules and statements re- were served on the trustee w proponent of an objection v amendments which were unac-	uired b no: (a) a ithin 14	oy paragrap approved t 4 days of	oh 4 above, and any other he plan, either affirmatively the date the plan was ser	pertinent information y or by failure to notify
6.	On this notice debtor(s); any debtor's attorn claims has expired, only on cre	ey; trus	tee; U.S. T	•	
Date	<u>(2078)</u> (2	Relatio <mark>975)</mark>	n to Propor	Attorney to debtors nent, and Contact Phone # cor's Taxpayer ID#(s) (last 4 of	
1355	5.10 (12/1/2018)		Page 1 of 2		

**NOTICE IS GIVEN THAT** the amended plan described above will become the plan, pursuant to 11 U.S.C. § 1329(b) if a chapter 13 case or 11 U.S.C. § 1229(b) if a chapter 12 case, unless within 21 days of the service date in paragraph 6 above, the trustee or other interested party:

- (1) files a written objection, setting forth the specific grounds for the objection, with the clerk at 1050 S.W. 6th Ave. #700, Portland OR 97204 or 405 E 8th Ave. #2600, Eugene OR 97401; and
- (2) serves the objection on the proponent and the trustee named in paragraph 3 above. The terms of the previously entered confirmation order continue to apply except to the extent such terms are inconsistent with the amended plan.

# UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

In re	
Nick Lee Evans,	) Case No. <u>17-32181-tmb13</u>
Kimberly Lorraine Evans,	) (NOTE: If blank, Case No. will be on the Meeting of Creditors Notice)
	1st Amended
	) CHAPTER 13 PLAN DATED 09/30/19 ; AND
	) MOTION TO VALUE COLLATERAL (See Paragraph 2(b)(1) and (2) below);
	) MOTION TO AVOID LIENS (See Paragraph 6 below)
	) THIS PLAN SETS OUT NONSTANDARD PROVISIONS BEGINNING WITH
Debtor(s)	PARAGRAPH 10
NOTICE TO INTERESTED DARTIES	Vous rights may be affected. Your claim may be modified or climinated. You

NOTICE TO INTERESTED PARTIES: Your rights may be affected. Your claim may be modified or eliminated. You should read these papers carefully and discuss them with your attorney. If you do not have one, you may wish to consult one.

If you oppose the Plan treatment of your claim or any provision of this Plan, you must file an objection to confirmation (or one must be filed on your behalf) within fourteen days after the conclusion of the meeting of creditors, unless otherwise ordered by the Bankruptcy Court or provided in a notice of amendment. See Local Bankruptcy Rule 3015-3(c). Failure of a creditor to file a written objection to the plan shall constitute acceptance of the plan and the Bankruptcy Court may confirm the plan without further notice. If there are any additional plan provisions or provisions that alter the language of paragraphs 1-9, they shall be outlined in paragraphs 10+ below.

4						
1.	The	debtor	shall	pay to	the	trustee:

(a) a monthly payment of \$ beginning December 2019, \$201	
--	--

- (b) all proceeds from avoided transfers, including proceeds from transfers avoided by the trustee;
- (c) upon receipt by the debtor, all tax refunds attributable to prepetition tax years and, upon receipt by the debtor, net tax refunds (i.e., tax refunds not otherwise provided for in the plan, less tax paid by debtor for a deficiency shown on any tax return for that same tax year or tax paid by setoff by a tax agency for a postpetition tax year) attributable to postpetition tax years during the: 36 months or 60 months from the date the first plan payment is due (note: refunds for the first three years of the plan are due in cases with 36 month commitment periods; refunds for all five years are due in cases with 60 month commitment periods):
- (d) a lump sum payment of \$\_\_\_\_\_\_ on or before \_\_\_\_\_ (date); and
- (e) non-exempt proceeds from personal injury claim listed in Schedule B, and proceeds from sale or refinance of real property as outlined in paragraph 11.

Debtor acknowledges that if the debtor is ever more than 30 days delinquent on any payment due under section 1(a) of this plan, upon motion of the trustee granted by the court after appropriate notice, a wage deduction order to debtor's employer may be issued immediately.

- 2. The trustee shall disburse all funds received pursuant to paragraph 1 as follows:
  - (a) First, to the trustee's percentage fee and expenses.
  - (b) Second, to secured creditors as provided in (1) and (2) below. Should the trustee not have sufficient funds in trust to pay fully the disbursements listed below, disbursements of funds available shall be made pro rata. The terms of the debtor's prepetition agreement with each secured creditor shall continue to apply, except as otherwise provided in this plan or in the order confirming plan. Secured creditors shall retain their liens until payment of the underlying debt, determined under nonbankruptcy law, or discharge under §1328(a), at which time the lien shall terminate and be released by the creditor.
    - (1) Cure of Default and Claim Modification. The debtor will cure the default and maintain the contractual installment payments (as provided in paragraph 4) on the secured claims listed below in the "Estimated Arrearage if Curing" column. The amount listed in this column is an estimate; the creditor's timely filed and allowed claim shall control. Claims provided for in the "Collateral Value if Not Paying in Full" column are allowed secured claims only to the extent of the value indicated, and pursuant to §506(a), the debtor MOVES the court for an order fixing the value of the collateral in the amount stated below. Unless a creditor timely objects to confirmation, the value of the creditor's interest in the collateral shall be limited to the amount listed below, and that amount will be paid under the plan with interest at the rate stated below.

For claims provided for in the "Estimated Secured Claim if Paying Secured Claim in Full" column, the creditor will receive the amount of the claim that is secured as set forth on the creditor's timely proof of claim, except as follows: If the claim is a "910 claim" not subject to 11 U.S.C. §506 pursuant to the hanging paragraph of 11 U.S.C. §1325(a)(9), the creditor will receive the total amount of the claim set forth on the creditor's timely proof of claim, even if that amount exceeds the secured portion of the claim.

For all creditors provided for under this subparagraph, if the creditor's claim will not be paid in full, the portion of the creditor's claim that exceeds the amount of the allowed secured claim shall be treated as an unsecured claim under paragraph 2(e) (if the claim identifies the priority position of the claim) and 2(f) below.

Instruction to debtor(s): Use **only one** of the following columns for each creditor: "Estimated Arrearage if Curing," **or** "Collateral Value if Not Paying in Full," **or** "Estimated Secured Claim if Paying Secured Claim in Full." All other columns must be completed.

Creditor	Collateral	Estimated Arrearage <b>OR</b> if Curing	Collateral Value if Not Paying in Full	Estimated Secured Claim if Paying OR Secured Claim in Full	Post- confirmation Interest Rate	Monthly Plan Payment
Selene Finance, LP (1st)	Residence	\$87,776	NA	NA	0%	*
Bank of America (2nd)	Residence	\$96,037	NA	NA	0%	**
ODR	Residence and Personal	NA	NA	\$3,179	9%	***
	Property					

<sup>\*</sup> Beginning December 2019, see paragraph 11

(2) Secured Claim Modification Not Expressly Authorized by the Code. This subparagraph may include, but is not limited to, modification of a claim secured by a purchase money security interest in either (1) a motor vehicle acquired for personal use by the debtor within 910 days before the bankruptcy filing date, or (2) any other personal property collateral acquired within one year before the bankruptcy filing. Secured claims provided for in this subparagraph shall be limited to the amount indicated in the "Amount of Claim as Modified (Value of Collateral)" column. The debtor MOVES the court for an order fixing the value of the collateral in the amount stated below.

DEBTOR PROPOSES THAT THE CREDITOR(S) SPECIFICALLY IDENTIFIED BELOW ACCEPT, EITHER EXPRESSLY OR IMPLIEDLY, THE FOLLOWING TREATMENT WHICH THE COURT MIGHT NOT BE ABLE TO APPROVE ABSENT CONSENT OF CREDITOR(S). FAILURE OF A CREDITOR TO FILE A WRITTEN OBJECTION TO THIS PLAN PRIOR TO CONFIRMATION SHALL CONSTITUTE ACCEPTANCE OF THE PLAN.

Creditor	Collateral	Amount of Claim as Modified (Value of Collateral)	Post-confirmation Interest Rate	Monthly Plan Payment
None				

(3) Adequate protection payments shall be disbursed by the trustee pre-confirmation from funds on hand with the trustee in the payment amounts specified in the plan for personal property secured creditors, absent a provision in this plan or a court order providing for a different amount to be paid pre-confirmation. If the debtor fails to make a monthly payment sufficient to pay the adequate protection payments in full, the trustee will disburse the funds pro rata according to the monthly payments proposed for those creditors. Adequate protection payments paid through the trustee pre-confirmation will be deducted from the amount of the allowed claim. Unless the concerned creditor is fully secured or oversecured for purposes of §506 or §1325(a)(9), no interest shall be paid from the date of the filing of the petition to the date of confirmation unless otherwise specifically provided for in the payment provisions set forth above.

<sup>\*\*</sup> Beginning December 2019, see paragraph 11

<sup>\*\*\*</sup> Beginning December 2019, claim filed with \$0 balance owing

Approved (4) Attorney Compensation: Original attorney fees and expenses are \$6,098.75, of which \$92.02 remains unpaid. If debtor has agreed to an estimated rather than a fixed fee, upon application, the court in its sole discretion may award not more than \$500 in addition to the above amount without further notice. Attorney fees are to be paid either: ☐ From all available funds after paragraph 2(b) payments are made; or Other All attorney fees, including supplemental compensation, shall be paid from all available funds after any fixed per month payments in ¶ 2(b) are made. (5) The debtor shall surrender any collateral not otherwise addressed by the terms of this plan no later than upon confirmation of this plan to the following (i.e., state creditor NAME followed by DESCRIPTION of collateral to be surrendered. If the debtor does not have possession of the collateral, this should be indicated below): none (c) Third, pro rata until fully paid, allowed unsecured domestic support obligations under §507(a)(1). (d) Fourth, allowed administrative expenses under §507(a)(2). (e) Fifth, pro rata, until fully paid, to allowed priority claims in the order stated in §507(a)(3)-(10), including §1305 claims.

(f) Sixth, pro rata, to timely filed and allowed nonpriority unsecured claims, the amounts required by §1325(b)(1). These monies will be distributed in the method indicated in the section marked below [MARK ONLY **ONE**].

(1) The creditors will receive approximately <u>13.00</u> % of their claims. Payment of any dividend will depend upon the amount of allowed secured claims, the amount of allowed priority claims (including costs of administration and the debtor's attorney's fees), and the total amount of allowed, nonpriority unsecured claims.

(2) The creditors will receive a minimum \_\_\_\_\_\_% of their claims. This percentage will not be reduced regardless of the amount of total creditors' claims filed.

(g) Pursuant to §1325(a)(4), the "best interest of creditors" number is determined to be \$2,910 \_\_\_\_\_, and not less than that amount shall be distributed to unsecured priority and, pro rata, non-priority creditors with timely filed and allowed claims. The total amount of allowed priority claims will reduce the amount distributed to unsecured, non-priority creditors.

(h) Pursuant to §1325(a)(4), all allowed unsecured claims shall receive interest of \_\_\_\_\_\_% from the time of confirmation.

3. The debtor ASSUMES the following executory contracts and leases:

Creditor	Amount of Default [State if None]	Cure Provisions
None		

Those executory contracts or leases not specifically mentioned above are treated as rejected. Any timely filed and allowed claim arising from rejection shall be treated under paragraph 2(f). The debtor will pay all assumed executory contracts and leases directly, including amounts required to cure. The debtor shall surrender any property covered by rejected executory contracts or leases to the affected creditor no later than upon confirmation of this plan.

4. The debtor shall pay directly to each of the following creditors, whose debts are either fully secured or are secured only by a security interest in real property that is the debtor's principal residence, the regular payment due post-petition on these claims in accordance with the terms of their respective contracts, list any pre-petition arrearages in paragraph 2(b)(1) and/or specify any other treatment of such secured creditor(s) in an additional paragraph at the end of this plan:

Selene Finance, LP (Residence - first mortgage) Bank of America (Residence - second mortgage)

5. Subject to the provisions of §502, untimely claims are disallowed, without the need for formal objection, unless allowed by court order.

6. The debtor MOVES, pursuant to §522(f)(1), to avoid the judicial liens and/or non-purchase money security interests of 1300.14 (12/1/16)

Page 3 of 4

[Note: Printed text may not be stricken.]

the following creditors because they impair an exemption(s) of the debtor: **Capital One** Absent objection from a creditor, the order of confirmation will avoid its lien and its claim will be treated in paragraph 2(f). 7. The applicable commitment period of this plan is 36 or 60 months. Debtor(s) shall make plan payments for the length of the commitment period unless the debtor(s) first pay 100% of all allowed claims with appropriate interest. If the commitment period is 36 months, the plan payments may continue for a longer period, not to exceed 60 months, as necessary to complete required payments to creditors. The approximate length of the plan is 55 months; cause to extend longer than 36 months is as follows: secured debt. 8. This plan may be altered post-confirmation in a non-material manner by court order after notice to the debtor, the trustee, any creditor whose claim is the subject of the modification and any interested party who has requested special notice. 9. Debtor Certification. Debtor(s) certifies that the petition was filed in good faith, and this plan was proposed in good faith and not by any means forbidden by law. Debtor(s) further certifies that all postpetition domestic support obligations have been paid in full on the date of this plan and will be paid in full at the time of the confirmation hearing. ADDITIONAL NONSTANDARD PROVISIONS (separately number below or on attachment(s), beginning with 10): Please see Addendum. /s/ Todd Trierweiler for Nick Evans /s/ Todd Trierweiler for Kimberly Evans DEBTOR **DEBTOR** CERTIFICATE OF SERVICE on Creditors/Parties Treated in Paragraphs 2(b)(1) (under the "Collateral Value if Not Paying in Full" column), 2(b)(2) (under the "Amount of Claim as Modified" column), 3, and 6 (see FRBP 3012, 4003(d), and 9014, and LBR 6006-1(b)). I certify that copies of this plan and the notice of hearing to confirm this plan were served as follows: a) For creditors/parties who are **not** Insured Depository Institutions (served by court) (see FRBP 7004(b)), I either listed the creditors/parties in the mailing list filed with the court exactly as follows, OR, on (insert date) , I served the above-documents by first-class mail to the creditors/parties at the names and addresses exactly as follows (list each creditor/party, the person or entity the creditor/party was served through, and the address): Selene Finance LP, c/o Corporation Service Company, RA, 1127 Broadway St. NE, Suite 310, Salem OR 97301 Seterus, Inc.,, c/o CT Corporation System, RA, 388 State St., #420, Salem OR 97301 ODR, Ellen Rosenblum, Atty. Gen., Oregon Department of Justice, 1162 Court Street NE, Salem OR 97301-4096 , I served the above-documents by b) For Insured Depository Institutions (see FRBP 7004(h)), on (insert date) certified mail, or by other authorized means (specify), at the name and address exactly as follows (list each insured depository institution, the person or entity the institution was served through, and the address): Bank of America NA, c/o Brian T. Moynihan, CEO, 100 N. Tryon St., Charlotte NC 28202 - CERTIFIED MAIL The Bank of New York Mellon, c/o Charles W. Scharf, CEO, 225 Liberty St., New York NY 10286 - CERTIFIED MAIL Capital One Bank, c/o Richard D. Fairbank, CEO, 1680 Capital One Dr., Mc Lean VA 22102 - CERTIFIED MAIL

1300.14 (12/1/16) Page 4 of 4 [Note: Printed text may not be stricken.]

/s/ Todd Trierweiler OSB 853481

DEBTOR OR DEBTOR'S ATTORNEY

Federal National Mortgage Assn., c/o Hugh R. Frater, CEO, 3900 Wisconsin Ave., NW, Washington DC 20016-2892

**CERTIFIED MAIL** 

In re Evans, 17-32181-tmb13 Addendum to 1<sup>st</sup> Amended Chapter 13 Plan dated 9/30/19

- 10. Notwithstanding the provisions of Paragraph 1(c) of this Plan, Debtors) shall not be required to pay any Earned Income Credits funds to the Trustee during the life of the Plan.
- 11. The Debtors shall sell or refinance their real property at 49700 SE Wildcat Mountain Drive, Sandy, Oregon, not later than January 31, 2022, and shall pay to the Trustee from the proceeds at closing, funds sufficient to pay all creditors secured by the subject property remaining in the plan. Secured creditors are Selene Finance, LP, and Bank of America. Debtors shall also pay to the Trustee for distribution through the Plan, non-exempt proceeds to the extent required by the Trustee's payoff quote. The Debtors shall obtain the Trustee's permission prior to any sale or refinance and to obtain that permission, provide copies to the Trustee of a preliminary closing statement and title report. The Debtors shall provide the Trustee with a copy of the final closing statement within 15 days following the close of the sale or refinance.
- 12. This plan is prospective only and shall not alter or affect the Debtors' obligations under any previously confirmed plan.

Label Matrix for local noticing

0979-3

Case 17-32181-tmb13 District of Oregon

Portland

Mon Oct 7 15:21:15 PDT 2019

Internal Revenue Service Centralized Insolvency Operation

P.O. Box 7346

Philadelphia, PA 19101-7346

Kimberly Lorraine Evans

49700 S.E. Wildcat Mountain Drive

Sandy, OR 97055-8662

Nick Lee Evans

49700 S.B. Wildcat Mountain Drive

Sandy, OR 97055-8662

MTGLQ Investors, L.P.

c/o Selene Finance LP

9990 Richmond Avenue, Suite 400 South

Houston, TX 77042-4546

ODR Bkcy

955 Center St NE

Salem OR 97301-2555

(P) PORTFOLIO RECOVERY ASSOCIATES LLC

PO BOX 41067

NORFOLK VA 23541-1067

THE BANK OF NEW YORK MELLON

c/o Bank of America, N.A.

P.O. Box 31785

Tampa, FL 33631-3785

U.S. Bank Trust National Association, as Tru

8

C/O SN Servicing Corp.

323 5th Street

Eureka, CA 95501-0305

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4).

Portfolio Recovery Associates, LLC

c/o Jc Penney POB 41067

Norfolk VA 23541

(d)Portfolio Recovery Associates, LLC

c/o Woman Within

POB 41067 Norfolk VA 23541 End of Label Matrix

Mailable recipients

Bypassed recipients 0

Total 8

Fill in this information to identify your case:							
Debtor 1	Nick Lee Evans						
	First Name	Middle Name	Last Name				
Debtor 2	Kimberly Lorraine	e Evans					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF OREGO	N-CH.13				
Case number	17-32181						
(II KIIOWII)							

Check if this is an amended filing

# Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Pa	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	493,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	133,928.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	626,928.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	505,833.00
i.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	609.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	430.00
	Your total liabilities	\$	506,872.00
a	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,293.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,092.00
a	4: Answer These Questions for Administrative and Statistical Records		
S.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	nedules.
<b>,</b> .	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

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Official Form 106Sum

page 1 of 2

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,876.00

### O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

5 D O	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	609.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	609.00

Debtor 2 (Spouse, if filing)  Kimberly Lorraine Evans First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF OREGON-CH.13
(Spouse, if filing) First Name Middle Name Last Name
United States People into Court for the DISTRICT OF ORECON CH 12
United States Bankruptcy Court for the: DISTRICT OF OREGON-CH.13
Case number 17-32181

Check if this is an amended filing

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	o you own or have a  No. Go to Part 2.  Yes. Where is the part 1		uitable interest in a	ny resid	ence, building, land, or similar property?			
1.1	49700 S.E. Wildcat Mountain Drive Street address, if available, or other description			What is the property? Check all that apply  ■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative		the	amount of any secure	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.
	Sandy City	OR State	<b>97055-0000</b> ZIP Code		Manufactured or mobile home  Land Investment property Timeshare Other has an interest in the property? Check one	Des		Current value of the portion you own? \$493,000.00 your ownership interest eancy by the entireties, or
	Olaskamas				Debtor 1 only		mestead	
	County				Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  information you wish to add about this iter erty identification number:	□ m, sud	Check if this is cor (see instructions)	nmunity property
				FΜV	Per Low Zillow			

pages you have attached for Part 1. Write that number here.....

\$493,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debte Debte		lick Lee Evans (imberly Lorraine Evans		Case number (if known)	17-32181
3. <b>Ca</b>	rs, vans	trucks, tractors, sport utility ve	ehicles, motorcycles		
	No				
■ .	Yes				
3.1	Make:	Ford	Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Model:	Escape	☐ Debtor 1 only		ve Claims Secured by Property.
	Year:	2010	☐ Debtor 2 only	Current value of t	the Current value of the
		mate mileage: 78k	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:	☐ At least one of the debtors and another		
	FIVIVE	er Kelley Blue Book	☐ Check if this is community property (see instructions)	\$6,560	\$6,560.00
3.2	Make:	Ford	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	F250 XLT	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2004	Debtor 2 only	Current value of t	the Current value of the
		mate mileage: 120k	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:	☐ At least one of the debtors and another		
	FMVP	er Kelley Blue Book	☐ Check if this is community property (see instructions)	\$3,822	2.00 \$3,822.00
3.3	Make:	Ford	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Ranger Long Bed	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	1995	Debtor 2 only	Current value of t	the Current value of the
	Approxi	mate mileage: 157k	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:	☐ At least one of the debtors and another		
	FMVP	er Kelley Blue Book	☐ Check if this is community property (see instructions)	\$536	5.00 \$536.00
3.4	Make:	Ford	Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Model:	Pickup	☐ Debtor 1 only		ve Claims Secured by Property.
	Year:	1949	☐ Debtor 2 only	Current value of t	the Current value of the
		mate mileage: 100+k	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$4,000	9.00 \$4,000.00
Exa	amples: E		nd other recreational vehicles, other vehicles atercraft, fishing vessels, snowmobiles, motorcy		
	. 55				
4.1	Make:	Keystone Springdale M-242	Who has an interest in the property? Check one  ☐ Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D:
	Model: Year:	2014	Debtor 2 only		ve Claims Secured by Property.
			■ Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
	Other in	formation:	☐ At least one of the debtors and another	onthis property :	polition you omit
	FMV p	per NADA RV Guide ge Title	Check if this is community property (see instructions)	\$12,650.0	\$12,650.00

Official Form 106A/B

Schedule A/B: Property

\_\_\_\_\_

page 2

Debtor 1 Debtor 2	Nick Lee Evans Kimberly Lorraine Evans		Case number (if known)	17-32181
		own for all of your entries from Part 2, include that number here		\$27,568.00
Part 3: D	Describe Your Personal and Househol	ld Items		
		e interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> □ No	hold goods and furnishings oles: Major appliances, furniture, line s. Describe	ens, china, kitchenware		
		hold Goods and Furnishings		\$3,000.00
□ No		video, stereo, and digital equipment; computers s, media players, games	s, printers, scanners; music c	ollections; electronic devices
	Misc. Housel	hold Electronics		\$500.00
		gs, prints, or other artwork; books, pictures, or o	other art objects; stamp, coin	, or baseball card collections;
Exam <sub>l</sub> □ No	oles: Antiques and figurines; painting other collections, memorabiliants.  Describe  Misc. Books,	• .	other art objects; stamp, coin	, or baseball card collections;
Examp  No Yes  Equipr Examp	oles: Antiques and figurines; paintinother collections, memorabilia.  b. Describe  Misc. Books, Twenty Limit	, collectibles		\$3,000.00
Examp  □ No ■ Yes  □ No □ Yes  □ No □ Yes  □ No □ No	poles: Antiques and figurines; painting other collections, memorabilians.  B. Describe  Misc. Books, Twenty Limit ment for sports and hobbies poles: Sports, photographic, exercise musical instruments  B. Describe	Pictures, and Art ted Edition Lithographs at \$150 Each and other hobby equipment; bicycles, pool tab		\$3,000.00
9. Equipr Examp No Yes 10. Fireal Exan	poles: Antiques and figurines; painting other collections, memorabilians.  B. Describe  Misc. Books, Twenty Limit ment for sports and hobbies poles: Sports, photographic, exercise musical instruments  B. Describe  Times mples: Pistols, rifles, shotguns, ammusical memorability.  Savage 30-30 Winchester 3 Remington 3 1950's)  Winchester 2 CVA 54-Calib CVA 12-Gaughawkins 50-0 Traditions 45	Pictures, and Art ted Edition Lithographs at \$150 Each and other hobby equipment; bicycles, pool tab	s) the 1950's) loom From the rloom) sband) Husband)	\$3,000.00

Debtor 1 Debtor 2	Nick Lee E Kimberly L	vans .orraine Evans	Case number (if known)	17-32181
■ Yes	. Describe			
		Misc. Wearing Apparel		\$200.00
□ No		jewelry, costume jewelry, engagen	nent rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
		Misc. Jewelry		\$1,500.00
Exam	arm animals apples: Dogs, cats	s, birds, horses		
	. Describe	and household items you did no	t already list including any health aids you did not list	
■ No	uner personal a	ina nousenoia items you dia no	t already list, including any health aids you did not list	
☐ Yes	. Give specific in	nformation		
		e of all of your entries from Part it number here	3, including any entries for pages you have attached	\$10,000.00
	escribe Your Fina			
Do you o	wn or have any	r legal or equitable interest in an	ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No		u have in your wallet, in your home	e, in a safe deposit box, and on hand when you file your petit	ion
			Cash on Hand	\$10.00
Exam		savings, or other financial accoun s. If you have multiple accounts wi	nts; certificates of deposit; shares in credit unions, brokerage th the same institution, list each.	houses, and other similar
□ No ■ Yes			Institution name:	
		Checking and 17.1. Savings	Bank of America #6062 checking: \$200 Bank of America #1972 savings: \$641	\$841.00
		s, or publicly traded stocks s, investment accounts with broke	rage firms, money market accounts	
■ No □ Yes		Institution or issuer nar	me:	
9. <b>Non-</b> p		stock and interests in incorpora	ted and unincorporated businesses, including an intere	st in an LLC, partnership, anc
■ No □ Yes	. Give specific i	nformation about them Name of entity:	% of ownership:	
Nego	tiable instrumen	ts include personal checks, cashie	ble and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them.	
	rm 106A/B		Schedule A/B: Property	page 4

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Debtor 1 Debtor 2	Nick Lee Evans Kimberly Lorraine Evans		Case number (if known)	17-32181
■ No				
	Give specific information about the Issuer name			
Exam	ment or pension accounts ples: Interests in IRA, ERISA, Keo	gh, 401(k), 403(b), thrift savings accounts, or other p	pension or profit-sharing	plans
□ No ■ Yes.	List each account separately.  Type of accounts	ınt: Institution name:		
	Simple IRA	Delaware Investments: esti	imate	\$92,409.00
Yours		ave made so that you may continue service or use for the properties of the propertie		nies, or others
		Institution name or individual:		
23. <b>Annui</b>	ties (A contract for a periodic payn	nent of money to you, either for life or for a number o	of years)	
■ No			, ,	
☐ Yes.	Issuer name and d	escription.		
	ts in an education IRA, in an acc .C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a qualified (b)(1).	ualified state tuition pro	ogram.
■ No □ Yes.	Institution name an	d description. Separately file the records of any inte	rests.11 U.S.C. § 521(c):	:
25. <b>Trusts</b> ■ No	s, equitable or future interests in	property (other than anything listed in line 1), ar	nd rights or powers exe	ercisable for your benefit
	Give specific information about the	nem		
		e secrets, and other intellectual property sites, proceeds from royalties and licensing agreement	ents	
	Give specific information about the	nem		
	ses, franchises, and other general ples: Building permits, exclusive lid	al intangibles censes, cooperative association holdings, liquor lice	nses, professional licens	es
■ No				
☐ Yes.	Give specific information about the	nem		
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. <b>Tax re</b> □ No	funds owed to you			
_	Give specific information about th	em, including whether you already filed the returns a	and the tax years	
		Potential 2014 - 2016 tax refunds	Federal and Sta	ate Unknown
■ No		ny, spousal support, child support, maintenance, divo	orce settlement, property	settlement

	btor 1 btor 2	Nick Lee Evans Kimberly Lorraine	e Evans	Case number (if known)	17-32181
!	<i>Exam</i> µ □ No		sability insurance payments, disability benefits, sick pans you made to someone else	k pay, vacation pay, workers' compe	nsation, Social Security
			Social Security Benefits: \$1974 per after medical insurance	er month gross / \$1863 net	Unknown
			Estimated Accrued Wages		\$600.00
		ets in insurance policional poles: Health, disability, of	es or life insurance; health savings account (HSA); cr	edit, homeowner's, or renter's insurar	nce
			ompany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		!	American Family Insurance: Term Insurance / No Cash Surrender or Loan Value Insured: Kimberly L. Evans	Nick L. Evans	\$0.00
		 	American Family Insurance: Term Insurance / No Cash Surrender or Loan Value Insured: Nick L. Evans	Beverly L. Evans	\$0.00
	If you a somed ■ No □ Yes.	are the beneficiary of a one has died.  Give specific informati	is due you from someone who has died living trust, expect proceeds from a life insurance on		eive property because
!	<i>Exam</i> µ □ No □		rment disputes, insurance claims, or rights to sue	se a demand for payment	
			Personal injury claim from 10/16/2 (co-debtor was side-swiped by ot Co-debtor is being treated for inju- Steve Krafchick is attorney repres	her driver / insured). uries.	Unknown
	No	contingent and unliqu	idated claims of every nature, including counte	erclaims of the debtor and rights to	set off claims
		Describe each claim  nancial assets you did			
	■ No □ Yes.	Give specific informati	on		
36.			of your entries from Part 4, including any entrie er here		\$93,860.00
Par	t 5: De	scribe Any Business-Rel	lated Property You Own or Have an Interest In. List ar	ny real estate in Part 1.	

Debtor 2			Case number (if known)	17-32181
37. <b>Do y</b> o	ou own or have any legal or equitable interest in any business-relat	ed property?		
■ No.	Go to Part 6.			
☐ Yes	s. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	st In.	
46. <b>Do</b> y	ou own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
<b>I</b>	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
Exa	you have other property of any kind you did not already list amples: Season tickets, country club membership oes. Give specific information	?		
	1963 International Bulldozer			\$2,500.00
54. <b>A</b> d	ld the dollar value of all of your entries from Part 7. Write th	nat number here		\$2,500.00
Part 8:	List the Totals of Each Part of this Form			
	rt 1: Total real estate, line 2			\$493,000.00
	rt 2: Total vehicles, line 5	\$27,568.00		
	rt 3: Total personal and household items, line 15	\$10,000.00		
	rt 4: Total financial assets, line 36	\$93,860.00		
	rt 5: Total business-related property, line 45	\$0.00		
	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b>	rt 7: Total other property not listed, line 54 +	\$2,500.00		
62. <b>To</b>	tal personal property. Add lines 56 through 61	\$133,928.00	Copy personal property to	otal \$133,928.00
63. <b>To</b>	tal of all property on Schedule A/B. Add line 55 + line 62			\$626,928.00

Fill in this information to identify your case:	
Debtor 1 Nick Lee Evans	
Debtor 2 (Spouse, if filing) Kimberly Lorraine Evans	
United States Bankruptcy Court for the: DISTRICT OF OREGON-CH.13	
Case number 17-32181	Check if this is:
(If known)	An amended filing
Official Form 106I	A supplement showing postpetition chapter 13 income as of the following date:  10/02/2019  MM / DD/ YYYY

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed	☐ Employed
	information about additional employers.	Occupation	☐ Not employed  Construction	■ Not employed  Disabled
	Include part-time, seasonal, or self-employed work.	Employer's name	Bud Bellamy & Son	
	Occupation may include student or homemaker, if it applies.	Employer's address	2053 S.E. First Street Gresham, OR 97080	
		How long employed th	nere? 38 Years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Debtor 1		Debtor 2 or filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	4,778.00	\$	0.00
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	4,778.00	\$	0.00

Schedule I: Your Income Official Form 106I page 1 Debtor 2 Kimberly Lorraine Evans Case number (if known)

17-32181

				Fo	r Debtor 1		Debtor 2 or a-filing spouse	
	Copy	y line 4 here	4.	\$	4,778.00	\$	0.00	
_	1:4		•	_	<u> </u>			
5.		all payroll deductions:	_	•		•		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	934.00	\$_	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$_	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	217.00	\$_	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$_	0.00	
	5e.	Insurance	5e.	\$_	234.00	\$_	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$_	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$_	0.00	
	5h.	Other deductions. Specify: AFLAC	5h.+	\$_	34.00	+ \$_	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,419.00	\$	0.00	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,359.00	\$_	0.00	
8.	List a 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income.	90	¢	0.00	¢	0.00	
	O.L	monthly net income.	8a. 8b.	\$_	0.00	\$_ \$	0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce	nt	\$_	0.00	· <u> </u>	0.00	
	04	settlement, and property settlement.	8c.	\$ \$	0.00	\$_	0.00	
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.	\$ \$	0.00	\$_ \$	0.00 1,934.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$ \$	0.00	\$_ \$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$_	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$_	1,934.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,359.00 + \$_	1,9	934.00 = \$ 5	,293.00
11.	Include other	e all other regular contributions to the expenses that you list in Schedulae contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not ify:	ur depen		•		Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rethat amount on the Summary of Schedules and Statistical Summary of Ceres					12. \$ <b></b>	,293.00
13.		ou expect an increase or decrease within the year after you file this for	m?				Combine monthly i	

Yes. Explain:

Debtor's occupation is seasonal; hours and wages fluctuate depending on the weather. Wages based on 2019 year-to-date total and projections for the last 3 months of the year.

Schedule I: Your Income Official Form 106I page 2

Eill	in this infor	mation to identify y	our case.						
Deb	otor 1	Nick Lee Ev	ans			Ch	eck if this is:		
							An amended filing		
	otor 2	Kimberly Lo	rraine Ev	ans			1 1	wing postpetition chapter fithe following date:	
(Spo	ouse, if filing)						10/02/2019	i the following date.	
Unit	ted States Ba	ankruptcy Court for the	: DISTRI	CT OF OREGON-CH.13			MM / DD / YYYY		
Cas	se number	17-32181							
	nown)	02.01							
O.	fficial F	Form 106J							
			Evnor	1606				40/41	_
		le J: Your			a filing to gother had	h ara aa	vially recognished f	12/15	_
info	ormation. It		eded, atta	. If two married people ar ich another sheet to this i n.					
Par	t 1: De	scribe Your House	ehold						
1.	Is this a j	joint case?							
	☐ No. Go	o to line 2.							
	Yes. D	oes Debtor 2 live	in a separ	ate household?					
		No	•						
			ot file Offici	al Form 106J-2, Expenses	for Congrete Househ	old of Da	obtor 2		
	_	res. Debiol 2 illu	St file Offici	ai Fuiiii 1005-2, Experises	ioi Separate nouserio	JIU OI DE	BOIOI Z.		
2.	Do you h	ave dependents?	■ No						
	Do not lis Debtor 2.	t Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?	
	Do not sta	ate the						□ No	
		nts names.						☐ Yes	
								□ No	
								☐ Yes	
								□ No	
								☐ Yes	
								□ No	
								☐ Yes	
3.		expenses include		No					
	• • • • • • • • • • • • • • • • • • • •	s of people other t		Yes					
	yoursen	and your depende	;1115 ;						
		timate Your Ongoi		· ·					
exp		of a date after the		uptcy filing date unless y y is filed. If this is a supp					
Inc	lude ovec	sees naid for with	non-ooch	government assistance i	f vou know				
				cluded it on Schedule I: Y					
(Of	ficial Form	106l.)					Your exp	penses	
						_			
4.				ses for your residence. I	nclude first mortgage	1	\$	1,592.00	
	payments	and any rent for th	ie ground o	or lot.		٦.	Ψ	1,002.00	
	If not inc	luded in line 4:							
	4a. Re	al estate taxes				4a.	\$	0.00	
		perty, homeowner'				4b.	\$	0.00	
		me maintenance, re				4c.	\$	0.00	
_		meowner's associa				4d.	·	0.00	
5.	Addition	al mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$	965.00	

Debtor 1 Debtor 2	Nick Lee Evans Kimberly Lorraine Evans	Case number (if known)	17-32181
6. <b>Uti</b> l	ities:		
6a.	Electricity, heat, natural gas	6a. \$	200.00
6b.	Water, sewer, garbage collection	6b. \$	40.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	300.00
6d.	Other. Specify:	6d. \$	0.00
	od and housekeeping supplies	7. \$	600.00
	Idcare and children's education costs	8. \$	0.00
	thing, laundry, and dry cleaning	9. \$	25.00
	sonal care products and services	10. \$	25.00
	dical and dental expenses	11. \$	100.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12. \$	250.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	25.00
	aritable contributions and religious donations	14. \$	0.00
	urance.		0.00
-	not include insurance deducted from your pay or included in lines 4 or 20.		
15a	. Life insurance	15a. \$	70.00
15b	. Health insurance	15b. \$	275.00
150	. Vehicle insurance	15c. \$	400.00
150	l. Other insurance. Specify:	15d. \$	0.00
	<b>es.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		
	ecify:	16. \$	0.00
	tallment or lease payments:	170 f	0.00
	. Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other Specify:	17c. \$	0.00
	l. Other. Specify: ur payments of alimony, maintenance, and support that you did not report a	17d. \$	0.00
	lucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		0.00
19. <b>Ot</b> ł	per payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	
20. <b>Ot</b> ł	er real property expenses not included in lines 4 or 5 of this form or on Scl	nedule I: Your Income.	
20a	. Mortgages on other property	20a. \$	0.00
20b	. Real estate taxes	20b. \$	0.00
200	Property, homeowner's, or renter's insurance	20c. \$	0.00
200	l. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20€	Homeowner's association or condominium dues	20e. \$	0.00
1. Oth	er: Specify: Personal miscellaneous	21. +\$	25.00
Pro	ppane	+\$	200.00
2. <b>Ca</b> l	culate your monthly expenses		
	. Add lines 4 through 21.	\$	5,092.00
	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		3,032.00
	Add line 22a and 22b. The result is your monthly expenses.	\$	5,092.00
220	. Add line 22a and 22b. The result is your monthly expenses.	Ψ	5,092.00
23. <b>Ca</b> l	culate your monthly net income.		
23a	. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,293.00
23b	Copy your monthly expenses from line 22c above.	23b\$	5,092.00
230	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. <b>\$</b>	201.00
For mod			ease or decrease because of a
	Yes. Explain here:		

Debtor 1	Nick Lee Evans				
	First Name	Middle Name	Last Name		
Debtor 2 Kimberly Lorraine		e Evans			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF OREGON-CH.13			
Case number	17-32181				

Check if this is an amended filing

### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Di	d you pay or agree to pay someone who is	OT an attorney to help you fill out bankruptcy form	ms?
	No		
	Yes. Name of person		h <i>Bankruptcy Petition Preparer's Notice,</i> aration, and Signature (Official Form 119
	der penalty of perjury, I declare that I have to they are true and correct.	ad the summary and schedules filed with this dec	elaration and
Х	/s/ Nick Lee Evans	X /s/ Kimberly Lorraine E	vans
	Misk Les Evens	Kimberly Lorraine Evar	
	Nick Lee Evans	Miniberry Lorranic Lvar	1S
	Signature of Debtor 1	Signature of Debtor 2	IS

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy